Substitute for form 1449A&B/PTO				Complete if Known			
INFORMATION DISCLOSURE				Application Number	10/511,118		
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SIA	STATEMENT BY APPLICANT			First Named Inventor	DZIEKAN, Marcin		
				Art Unit			
(use as many sheets as necessary)			s necessary)	Examiner Name			
Sheet	1	of	1	Attorney Docket Number	080681_00000015		

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Examiner Signature	John A. Ricci	2	Date Considered	6/22/06
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